



Consumer Lender Supplement Renewal Application

This application must be completed by typewriter or legibly printed.

Do not leave any blank spaces. There must be an answer provided for each inquiry. If not applicable use "None" or "n/a."

Do not add attachments in lieu of completing our form.

Company Name:

License Number:

CL-

1. Required Assets:

Does licensee have and maintain at least twenty-five thousand dollars (\$25,000) in assets readily available for use in the conduct of the business of each licensed office and branch office? (If no, please provide an explanation)

Yes No

2. Loan Information:

Total Number of consumer loans made for the period of 07/01/2010 through 05/31/2011:

3. Affidavit

State of _____

County of _____

I _____ as _____ swear or affirm that I have executed this form

Print Name

Print Official Title

before a Notary Public, of my own free will and:

- (a) I have read and understand the items and instructions on this form;
- (b) My answers (including attachments) are true and complete to the best of my knowledge;
- (c) I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers;
- (d) I authorize all my current and former *employers*, law enforcement agencies, and any other *person* to furnish to any *jurisdiction*, or any agent acting on its behalf, any information they have, including without limitation my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former *employers*, complete reasons for my termination;
- (e) I have read and understand applicable federal and state law, and will be in compliance at all times;
- (f) I promise to keep the information contained in this form current and to file accurate supplementary information on a timely basis;
- (g) I understand that this renewal has to be signed by one of the owners or officers on file with the Department of Financial Institutions**

Signature of individual: _____

Date (MM/DD/YYYY) _____

Subscribed and sworn to before me this _____ day of _____ 20 _____

Date

Month

Year

Print Notary Public name: _____

Notary Public signature: _____

Notary Appointment Expires (MM/DD/YYYY): _____

Notary seal here

4. Renewal Fees:

Principal Primary Licensed location: \$1,000.00

Current number of Arizona branch location(s) being renewed: Total # x \$200.00 = \$

Make payable to: Arizona Department of
Financial Institutions or AZDFI

Total All lines
Pay the amount entered here all on one check \$



Consumer Lender Supplement Renewal Application Checklist

- ☐ \$1,000 Renewal Fee for principal location
- ☐ \$200 Renewal Fee for each branch location(s) that is renewing
- ☐ Company Financial Statement
- ☐ Standard Rate of Charge Report
- ☐ Copy of a current Certificate of Good Standing from the Arizona Corporation Commission (if applicable)
- ☐ All changes to your license are to be sent to the department under separate cover. Do not include/submit with renewal package. (See Renewal Instructions for information on making changes to your license.)
- ☐ Be sure to include with your submission the "DFI License Renewal Application" and all applicable required documents listed on the "DFI License Renewal Application" checklist.